

P B
PATENT FEE TRANSMITTAL
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PART B - FEE(S) TRANSMITTAL

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25908 7590 06/01/2006

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<i>Barbara Ahola</i>	(Depositor's name)
<i>Barbara Ahola</i>	(Signature)
<i>August 29, 2006</i>	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/038,723	01/02/2002	Bjarne Roenfeldt Nielsen	5636.210-US	6089

TITLE OF INVENTION: GLUCOAMYLASE VARIANTS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	09/01/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
RAO, MANJUNATH N	1652	435-205000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member at least one registered attorney or agent) and the names of up to 2 registered patent attorneys or agents if no name is listed, no name will be printed.
<input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. <input type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.	<i>Jason Garbell</i> <i>Aug 12, 2006 TTSVAH220600112 501701 10036723</i> <i>1400.00 DA</i> <i>300.00 DA</i> <i>3.00 DA</i>

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PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Novozymes A/S

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Bagsvaerd Denmark

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

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Authorized Signature Jason Garbell

Date 8.29.06

Typed or printed name Jason Garbell

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